Applicants: William C. Olson et al.

Serial No.: 09/912,824

Group Art Unit: 1648

Filed:

July 25, 2001

Examiner: Jeffrey S. Parkin

For:

COMPOSITIONS AND METHODS FOR INHIBITION OF HIV-1 INFECTION

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

2 2 2004 gg October 20, 2004

S I R:

Transmitted herewith is an amendment to the above identified application.

- Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.
- No additional fee is required.

The filing fee is calculated as follows:

	NUMBER		HIGHEST		NUMBER OF		RATE	RATE			FEE
.′	AFTER AMEND- MENT		NUMBER PREVIOUSL Y PAID FOR	:	EXTRA CLAIMS PRESENTED		SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	33	-	20	=	13	·x	\$9.00	\$18.00	=	117.00	
Independent Claims	8	-	4	=	4	x	\$44.00	\$88.00	-	176.00	·
Multiple Dependent Claim(s) Presented X Yes No For First Time							\$150	\$300	0	150.00	
							TOTAL ADDITIONAL FEE \$443.00				

- *If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- **If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- ***If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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> "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed

- Please charge Deposit Account No. 03-3125 in the Three copies of this sheet is amount of \$. enclosed.
- A check in the amount of \$1,113.00 is enclosed. X
- <u>X_</u> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposition Account No. 03-3125 . Three copies of this sheet are enclosed.
 - Any filing fees under 37 C.F.R. \$1.16 for the presentation of extra claims.
 - Any patent application processing fees X under 37 C.F.R. §1.17.

Respectfully submitted,

I hereby certify that this correspondence is being deposited this date with the U.S. postal Service with sufficient postage as first class mail in an envelope addressed_to: Commissioner for Patents, P.O 1450, Alexandria, VA 22313-1450

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